



Affordable Housing FOR RENT IN SEATTLE



Studio, one-bedroom, and two-bedroom rentals available through the affordable housing program for qualifying future residents at AVA Ballard.

AVA Ballard residents are responsible for electric, phone, and cable utilities. Additional monthly fees may apply for parking and pets. An increased security deposit will be required for households with pets.



www.AVABallard.com
206.783.4333
Ballard@AvaApartments.com

HOUSEHOLDS MUST BE WITHIN THE INCOME LEVELS BELOW TO QUALIFY
Monthly rent is based on the Area Median Income (AMI)

80% PROGRAM

STUDIO: \$1,141 PER MONTH

1 person household \$ 27,384 - \$ 50,640
2 person household \$ 27,384 - \$ 57,840

ONE-BEDROOM: \$1,321 PER MONTH

1 person household \$ 31,704 - \$ 50,640
2 person household \$ 31,704 - \$ 57,840
3 person household \$ 31,704 - \$ 65,040

90% PROGRAM

THREE-BEDROOM: \$1,654 PER MONTH

2 person household \$ 39,696 - \$ 65,070
3 person household \$ 39,696 - \$ 73,170
4 person household \$ 39,696 - \$ 81,270
5 person household \$ 39,696 - \$ 87,840

*Rents subject to change at anytime without notice. Apartments contain FHA compliant features for persons with disabilities.



Date: _____
Office use only

Time: _____

Initial: _____

AVA Ballard Affordable Housing Pre-Application
Free Translation/Language Assistance Available Upon Request

Applicants with disabilities may request modifications to the rental unit and/or accommodations to our rules, policies, practices or services, if such modifications or accommodations are necessary to afford an equal opportunity to use and enjoy the premises

NAME OF PRIMARY APPLICANT: _____

PHONE: _____ CELL: _____ EMAIL: _____

CURRENT ADDRESS: _____

Street Number & Name City St Zip

1. What size apartment home(s)* are you interested in? **Studio One Two**

*Note: Minimum occupancy requirement one person per bedroom.

2. Does your household need an accessible apartment? (circle one): **Yes No**

3. Do you have a voucher? (circle one) **Yes No**

If Yes, Housing Authority Name: _____

4. Do you have any special housing needs? **Yes No** If yes, please explain: _____

5. Family Composition- List all those who will occupy the apartment, including yourself:

HOUSEHOLD MEMBER NAME	Date of Birth	Age	Relationship*	Full Time Student (Y/N)
1			Head	
2				
3				
4				
5				
6				
7				



Please call 206-783-4333 or with any questions or requests for additional applications or consent forms.

6.

Household Income- what is the income received and assets held by each member of your household? Include income from employment, SSA/SSI, TANF, Child Support, Alimony, Retirement, pension, unemployment, Military Pay, and gift income.

Household Member Name	Income Type	Gross Earnings (before taxes)

7. What is your combined total gross annual household income from all sources? \$ _____

** You must meet the income guidelines to qualify!*

8. **Household Assets-** include the household assets held may each household member. Includes all Checking and Savings accounts, Money Markets, Stocks, Bonds, Life Insurance Policies.

NOTE: Applicants may not own real estate at the time of lease execution.

Household Member Name	Asset Type	Cash Value

I certify that the information furnished in this application is true and complete, to the best of my knowledge and belief.
Signed under the pains and penalties of perjury.

Head of Household Signature: _____ **Date:** _____

Please return to:
AVA Ballard
5555 14th Ave NW
Seattle, WA 98107

Fax: 206-783-4070



Please call 206-783-4333 or with any questions or requests for additional applications or consent forms.